## LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals. Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

## Instructions

Print in ink or type.

- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

|    |     |       |                |       |        |          | 30         |       |        |       |      |     |      |         |              |       |        |                        |      |       | 1                 | 980   | 1343   |  |
|----|-----|-------|----------------|-------|--------|----------|------------|-------|--------|-------|------|-----|------|---------|--------------|-------|--------|------------------------|------|-------|-------------------|-------|--------|--|
| 1. | NAN | 4E    |                |       | atr    | icl      | ,          | Cimo  |        |       | Ģ.   |     |      |         |              |       | _      | 14                     | 1.0  | 2,7   | O                 |       |        |  |
|    |     |       | L              | ast   |        |          |            |       |        | First |      |     |      |         | *SC1 216070  | M     | Ľ.     | 111                    | CA   |       | US                |       |        |  |
| 2. | BUS | INES  | S PH           | ONE   |        |          |            | 5 E   |        |       |      |     |      |         |              |       |        | 20                     | 1.4  | 0     | /201 <sub>4</sub> | الجها |        |  |
|    |     |       |                |       |        |          |            |       |        |       |      |     |      | 555 2   |              | 58:22 | 000000 | 335<br>N <b>a</b> 2138 |      |       | 2000 2            |       | 20     |  |
| 3, | BUS | MES   | SAI            | DRE   |        |          | M No       |       | AB     | St    | ree  |     | Suil | e 2     | 400,<br>Star |       | ew (   |                        | C 81 | 15,   | LA 7              | 0130  | )      |  |
| 4, | ЕМР | LOY   | er_            | Shi   | 12371  | 3102.73  | 53000      | S.    | ınd    | L.    | L.F  |     | 355  | 8/4/40  |              |       |        |                        | шp   |       |                   |       |        |  |
| 5. | ЕМР | LOY   | er's           | ADI   | RES    | <u>.</u> | 50         |       |        |       |      | eet | , Sı |         | 240          | ם.    |        |                        | r1e  | • • • | , T,A             | 701   | 130    |  |
|    |     |       |                |       |        |          |            | Shree | and a  | No.   |      |     |      | City    |              |       | State  |                        |      | Z     | P                 |       |        |  |
|    | 1.  |       | r <b>ė</b> 55_ | LT-CL | ACCOMO | 38       | 38         | Noz   | th     | Са    | use  | way | Bly  | d.,     | Sui          | Loca. | 33(    | )Đ,                    | Ме   | tai   | rie,              | Lou   | ıîsian |  |
|    |     | Busi  | ness           | OT PU | pose_  | Te       | Lep        | hor   | 18     | Com   | mur. | 108 | tion | 15      |              | - 69  | 98     |                        |      | ¥2    |                   |       |        |  |
|    |     | Does  | s this         | рство | n pay  | you      | 7 <u>3</u> | 69    |        |       |      |     |      |         |              |       |        |                        |      |       |                   |       |        |  |
|    |     | IFN   |                |       | e Man  | ,        |            |       |        |       |      |     |      |         | - 3          |       | Qi.    |                        |      |       |                   |       |        |  |
|    |     | Tr 14 | o, wi          | u pay | s you  | _        |            |       |        |       |      |     |      | 25      | - 2          |       |        |                        |      |       |                   |       |        |  |
|    | 2.  | Nem   | le             |       |        |          |            |       |        |       | 70   |     |      |         |              |       | 30     |                        |      |       |                   |       |        |  |
|    |     | Add   | ress_          |       |        |          |            |       |        |       |      |     |      |         |              |       |        | 90                     |      |       |                   |       |        |  |
|    |     | Busi  | ness           | ot ba | pose_  |          |            |       |        |       |      |     |      |         |              |       |        |                        |      |       |                   |       |        |  |
|    |     | Doe   | s this         | perso | n pay  | you      | 7          | _     | 2      |       |      |     |      |         |              |       |        |                        |      |       |                   |       |        |  |
|    |     | If N  | o, wh          | о рау | s you  |          | -          |       | E25-02 |       |      |     |      | 5000000 |              | 234   | 23     |                        |      |       |                   |       |        |  |
|    |     |       |                |       |        |          |            |       |        |       |      |     |      |         |              |       |        |                        |      |       |                   |       |        |  |

abbyist's Registration Number

FOR OFFICE USE ONLY, Postmark Date: 17 | 5 | 9 |

REG

## LOBBYING REGISTRATION FORM



ONLY

| 3. Name                                                                                     |                                          |
|---------------------------------------------------------------------------------------------|------------------------------------------|
| Address                                                                                     |                                          |
| Business or purpose                                                                         | 1000 hA 32733                            |
| Does this person pay you?                                                                   | N-32 W                                   |
| If No, who pays you?                                                                        | 10-10-10-10-10-10-10-10-10-10-10-10-10-1 |
| 4. Name                                                                                     |                                          |
| Address                                                                                     |                                          |
| Визінезя от ригрозе                                                                         | 38 38031 380                             |
| Does this person pay you?                                                                   | 7288 1 <del>1 10 13</del>                |
| If No, who pays you?                                                                        | 2017_101                                 |
| . Name                                                                                      |                                          |
| Address                                                                                     |                                          |
| Business or purpose                                                                         |                                          |
| Does this person pay you7                                                                   | 33 12 - 30                               |
| If No, who pays you?                                                                        | <u> </u>                                 |
|                                                                                             |                                          |
| State of Louisiana                                                                          |                                          |
| Parish of Orleans                                                                           |                                          |
| Before me, the undersigned authority, personally came and appeared $\Gamma \underline{i} i$ | mothy P. Kirkpatrickwho, after being     |
| duly sworn by me, did declare and acknowledge to me that the above sta                      | atements are true and correct.           |
| Signature of Lobbyist                                                                       | gn-                                      |
|                                                                                             |                                          |
| Swom to and subscribed before me on this 24th days                                          | 2 2 3                                    |
|                                                                                             | ATTACH<br>2" x 2"                        |
|                                                                                             | PHOTOGRAPH                               |
| Notary Public                                                                               | HERE                                     |
| DANIEL LUND, III                                                                            | FOR                                      |
| Rev. 8/97 MOTERY PUBLIC                                                                     | INITIAL PEGISTRATION                     |
| Proish of Orleans, State of Longitional                                                     | REGISTRATION                             |

My Commission is issued for hife.



TOTAL TOTAL